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#### FEC FORM 2

#### STATEMENT OF CANDIDACY

1. (a									
	a) Name of Candidate (in full)								
//-	Hyde-Smith, Cindy, , ,		Shook if addra	aa ahanaad		2 Candidat	o'o FEC Idontifi	action Number	
`	o) Address (number and street) PO Box 2930		Check if addre	ss changed		S8MS0	e's FEC Identifi 0261	cation Number	
(c	c) City, State, and ZIP Code					3. Is This	New	v	Amended
	Jackson		MS	3920		Stateme	( )	OR X	(A)
4. P	arty Affiliation	5. Office Sou	ght		6. State & Dist	rict of Candida	ate		
F	REPUBLICAN PARTY	Senate	)		MS	00			
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIGN	N COMMIT	ITEE		
7. 11	hereby designate the following nar	med political co	ommittee as n	ny Principal (	Campaign Comn		2026 (year of election	_ election(s).	
	OTE: This designation should be f	iled with the a	opropriate offi	ce listed in t	ne instructions.				
(a	a) Name of Committee (in full)  Cindy Hyde-Smith for	or US Se	nate						
/1-	)								
(L	p) Address (number and street) PO Box 2930								
(c	c) City, State, and ZIP Code								
	Jackson				MS	39207			
	DE				THORIZED		ΓEES		
		(	Including Joir	nt Fundraisin	g Representative	es)			
	hereby authorize the following nan andidacy.	ned committee	, which is NO	T my princip	al campaign con	nmittee, to rec	ceive and expen	nd funds on bel	nalf of my
	NOTE: This designation should be filed with the principal campaign committee.								
N	OTE: This designation should be f	iled with the pi	incipal campa	ign committe	ee.				
		iled with the pr	incipal campa	ign committe	ee.				
	OTE: This designation should be fa) Name of Committee (in full) WIN Misissippi	iled with the pi	incipal campa	ign committe	ee.				
(a	a) Name of Committee (in full) WIN Misissippi	iled with the pr	incipal campa	ign committ	ee.				
(a	a) Name of Committee (in full)	iled with the pi	incipal campa	ign committ	96.				
(a	a) Name of Committee (in full) WIN Misissippi  b) Address (number and street)	iled with the pr	incipal campa	ign committ	ee.				
(a	a) Name of Committee (in full)  WIN Misissippi  b) Address (number and street) PO Box 9891	iled with the pi	incipal campa	ign committ	ee.	22219			
(a	a) Name of Committee (in full)  WIN Misissippi  D) Address (number and street) PO Box 9891  C) City, State, and ZIP Code				VA		true, correct and	d complete.	
(a	a) Name of Committee (in full)  WIN Misissippi  D) Address (number and street) PO Box 9891  C) City, State, and ZIP Code  Arlington				VA		true, correct and	d complete.	
(t	a) Name of Committee (in full)  WIN Misissippi  D) Address (number and street) PO Box 9891  E) City, State, and ZIP Code  Arlington  I certify that I have example of the content of the c			the best of	VA	and belief it is		d complete.	
(d)	a) Name of Committee (in full)  WIN Misissippi  b) Address (number and street) PO Box 9891  c) City, State, and ZIP Code Arlington  I certify that I have example to the condition of Candidate	mined this Sta	tement and to	the best of	VA my knowledge a tronically Filed]	Date 11/05/202	0		37g.
(d)	a) Name of Committee (in full)  WIN Misissippi  D) Address (number and street) PO Box 9891  C) City, State, and ZIP Code  Arlington  I certify that I have example of Candidate  e-Smith, Cindy, , ,	mined this Sta	tement and to	the best of	VA my knowledge a tronically Filed]	Date 11/05/202	0		37g.
(d)	a) Name of Committee (in full)  WIN Misissippi  D) Address (number and street) PO Box 9891  C) City, State, and ZIP Code  Arlington  I certify that I have example of Candidate  e-Smith, Cindy, , ,	mined this Sta	tement and to	the best of	VA my knowledge a tronically Filed]	Date 11/05/202	0		37g.

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

# Optional Supplemental Page for Designation of Additional Authorized Committees

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## **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full) 2019 Senators Classic Committee (Joint Fundraising Representative)					
	(b) Address (number and street) 228 S Washington St Suite 115					
	(c) City, State, and ZIP Code					
	Alexandria	VA	22314			
8.	I hereby authorize the following named committee, which is NOT my princicandidacy. <b>NOTE</b> : This designation should be filed with the principal camp					
	(a) Name of Committee (in full) KEEP THE SENATE RED					
	(b) Address (number and street) PO BOX 76024					
	(c) City, State, and ZIP Code					
	WASHINGTON	DC	20002			
8.	I hereby authorize the following named committee, which is NOT my princicandidacy. NOTE: This designation should be filed with the principal campa.  (a) Name of Committee (in full)  HYDE-SMITH VICTORY FUND		•			
	(b) Address (number and street) 228 S WASHINGTON ST					
	SUITE 115					
	(c) City, State, and ZIP Code					
	ALEXANDRIA	VA	22314			
8.	I hereby authorize the following named committee, which is NOT my princi candidacy. <b>NOTE</b> : This designation should be filed with the principal camp		•			
(a) Name of Committee (in full)						
	THE VICTORY CLUB					
	(b) Address (number and street) PO BOX 60148					
	(c) City, State, and ZIP Code					
	WASHINGTON	DC	20039			

FEC Form 2S (Revised 02/2017)

# Optional Supplemental Page for Designation of Additional Authorized Committees

Page	<sup>3</sup> of	4

## **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.				
	(a) Name of Committee (in full)				
	FRIENDS OF CINDY HYDE-SMITH				
	(b) Address (number and street) PO BOX 60148				
	(c) City, State, and ZIP Code				
	WASHINGTON	DC	20039		
8.	I hereby authorize the following named committee, which is NOT my princ candidacy. <b>NOTE</b> : This designation should be filed with the principal cam				
	(a) Name of Committee (in full)				
	WIN MISSISSIPPI				
	(b) Address (number and street) PO BOX 9891				
	(c) City, State, and ZIP Code				
	ARLINGTON	VA	22219		
8.	I hereby authorize the following named committee, which is NOT my princ candidacy. NOTE: This designation should be filed with the principal came (a) Name of Committee (in full)  HYDE-SMITH VICTORY FUND				
	(b) Address (number and street) 228 S WASHINGTON ST				
	SUITE 115				
	(c) City, State, and ZIP Code				
	ALEXANDRIA	VA	22314		
8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.				
	(a) Name of Committee (in full)				
	2019 Senators Classic Committee				
	(b) Address (number and street) 228 S Washington St				
	Suite 115				
	(c) City, State, and ZIP Code				
	Alexandria	VA	22314		

FEC Form 2S (Revised 02/2017)

# Optional Supplemental Page for Designation of Additional Authorized Committees

Page	$^4$ of $^4$	
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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)  KEEP THE SENATE RED					
	(b) Address (number and street) PO BOX 76024					
	(c) City, State, and ZIP Code WASHINGTON DC 20002					
3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of recandidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.	ny				
	(a) Name of Committee (in full) THE VICTORY CLUB	_				
	(b) Address (number and street) PO BOX 60148	_				
	(c) City, State, and ZIP Code WASHINGTON DC 20039					
3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of n candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.	ny				
	(a) Name of Committee (in full)	—				
	(b) Address (number and street)					
	(c) City, State, and ZIP Code					
3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of no candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.	ny				
	(a) Name of Committee (in full)					
	(b) Address (number and street)	_				
	(c) City, State, and ZIP Code	_				